2004 – 2005
ANNUAL REPORT

ADDICTIONS
FOUNDATION
OF MANITOBA

ACHIEVING
EXCELLENCE

ACCREDITED • AGRÉÉ • CCHSA • CCASS

LEADING THE WAY TO AN ADDICTION FREE SOCIETY

PROVINCIAL ADMINISTRATION:
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MINISTER OF HEALTHY LIVING

Room 310
Legislative Building
Winnipeg, Manitoba, CANADA
R3C 0V8

His Honour John Harvard
Lieutenant-Governor
Province of Manitoba

May It Please Your Honour:

We have the privilege of presenting herewith the Annual Report of the Addictions Foundation of Manitoba for the fiscal year 2004-2005.

Sincerely,

Theresa Oswald,
Minister of Healthy Living

ADDICTIONS
FOUNDATION
OF MANITOBA

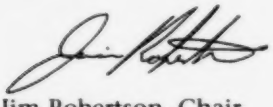
FONDATION MANITOBAINE
DE LUTTE CONTRE
LES DEPENDANCES

The Honourable Theresa Oswald
Minister of Healthy Living
Winnipeg, Manitoba
R3C 0V8

Dear Minister Oswald:

I have the honour of presenting herewith the Annual Report of the Addictions Foundation of Manitoba for the fiscal year 2004-2005.

Sincerely,



Jim Robertson, Chair
AFM Board of Governors

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Leading the way to an addiction free society

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CHAIR'S REMARKS

I am pleased to present the 2004-2005 Annual Report for the Addictions Foundation of Manitoba (AFM). This report provides an overview of the AFM and highlights of the organization's achievements, services, community involvement and activities.

AFM strives to enhance its services by piloting new projects and implementing innovative program changes, as well as by developing new partnerships and maintaining existing ones.

This year, the Board of Governors continued to work on Board Policy. New policies establishing Executive Limitations were approved, and new guidelines for the Board-CEO relationship were put into place.

The Executive Policy Committee of the Board of Governors was involved in the Leadership and Partnership Team during the accreditation process. This process was completed in early February, when the AFM was officially surveyed by the Canadian Council on Health Services Accreditation. We, the Board, are very pleased with the results of this process and would like to express our appreciation to all the staff involved for their great work in this undertaking.

The last year has been noteworthy and full of new accomplishments due to the hard work of everyone at the AFM.

Jim Robertson
Chair,
AFM Board of Governors

CEO'S REMARKS

This past year has presented numerous opportunities for the organization. Most noteworthy is that in February we had our first ever accreditation survey conducted by the Canadian Council on Health Services Accreditation. I am pleased that AFM was awarded a three year "Accredited" Status with a few recommendations. By all accounts, our partners – the provincial government and, most importantly, our clients – see us as leaders in the addictions field.

The AFM continues to work in partnership with government and non-government organizations in the areas of rehabilitation, prevention and education. Our involvement in national partnerships plays a key role in research initiatives, demonstrated through the Canadian Addictions Survey (CAS) – a national survey spearheaded by the Canadian Executive Council on Addictions (CECA), of which AFM is a member. This survey was designed to provide a detailed assessment of how Canadians 15 years and older use alcohol and other drugs. It showed that the use of alcohol, cannabis and other drugs has increased in Canada over the past decade, especially in the 18 to 24 age group. This timely information is vital in our development of programs for this target group.

In the areas of public awareness, four new ads were created and rolled out in various forms of media advertising. As well, our media contacts continue to increase as the agency is seen as being a credible source of information regarding issues related to the use and abuse of alcohol and other drugs, and gambling.

I would like to take this opportunity to thank all AFM employees and our Board members for their hard work in helping this organization achieve its accreditation status. It is through them that the AFM continues to strengthen our working relationships and provide our customers with the best possible outcomes through client centered services.

John Borody
Chief Executive Officer

CORPORATE OVERVIEW OF AFM

BOARD OF GOVERNORS

The AFM Board is comprised of 15 Manitoba community members appointed through an Order in Council by Government. Committees of the Board of Governors include:

A) *Executive Policy Committee (EPC)*, which is an annually elected sub-committee of the Board of Governors. The Board Chair, appointed by the Minister of Health, chairs the EPC according to the legislation and by-laws for the AFM. Members include:
- Board Chair
- Vice-Chair
- Treasurer
- two members-at-large of the Board

Front Row L-R: Larry Muirhead (Vice-Chair), Dorothy McLoughlin, George Daniels, Bonnie Kocsis, Jim Robertson (Chair)
Back Row L-R: Vicky Yakemishin, Adele Larson, Boyd Kramble (Treasurer), Lanette Bowman, Gerry Haney, Marylin Cottyn.
Missing: Stephen Edwards, Randy Porter

B) *Audit Committee* is comprised of three to six members:
- Board Chair (Ex-officio)
- Board Treasurer (Designated as Board Financial authority)
- one or two other members of the Board (Appointed by the Chair through application process from the Board of Governors)
- one other external member (optional – selected for Financial knowledge/experience)
- AFM Director of Finance [Ex-officio] (Designated as AFM Financial authority)

The Board operates under the guidelines set out in the AFM Act and By-Laws. The Board of Governors approved a formal Board Policy Development Process, which provides a framework for the development of new and the review of existing board policies. The Board of Governors works to develop policies as required to meet the requirements of their legislated mandate.

This past year the Board of Governors developed and approved the following new policies on June 29, 2004:

Board-CEO Relationship Policies
- CEO Job Description
- Delegation to the CEO
- Monitoring Executive Performance

Executive Limitations Policies
- General Executive Constraint
- Consultation in Major Changes
- Financial Planning/Budgeting
- Financial Condition & Activities
- Asset Protection
- Communication & Support to Board
- Information Management

Strategic Direction Policy
- Vision and Mission

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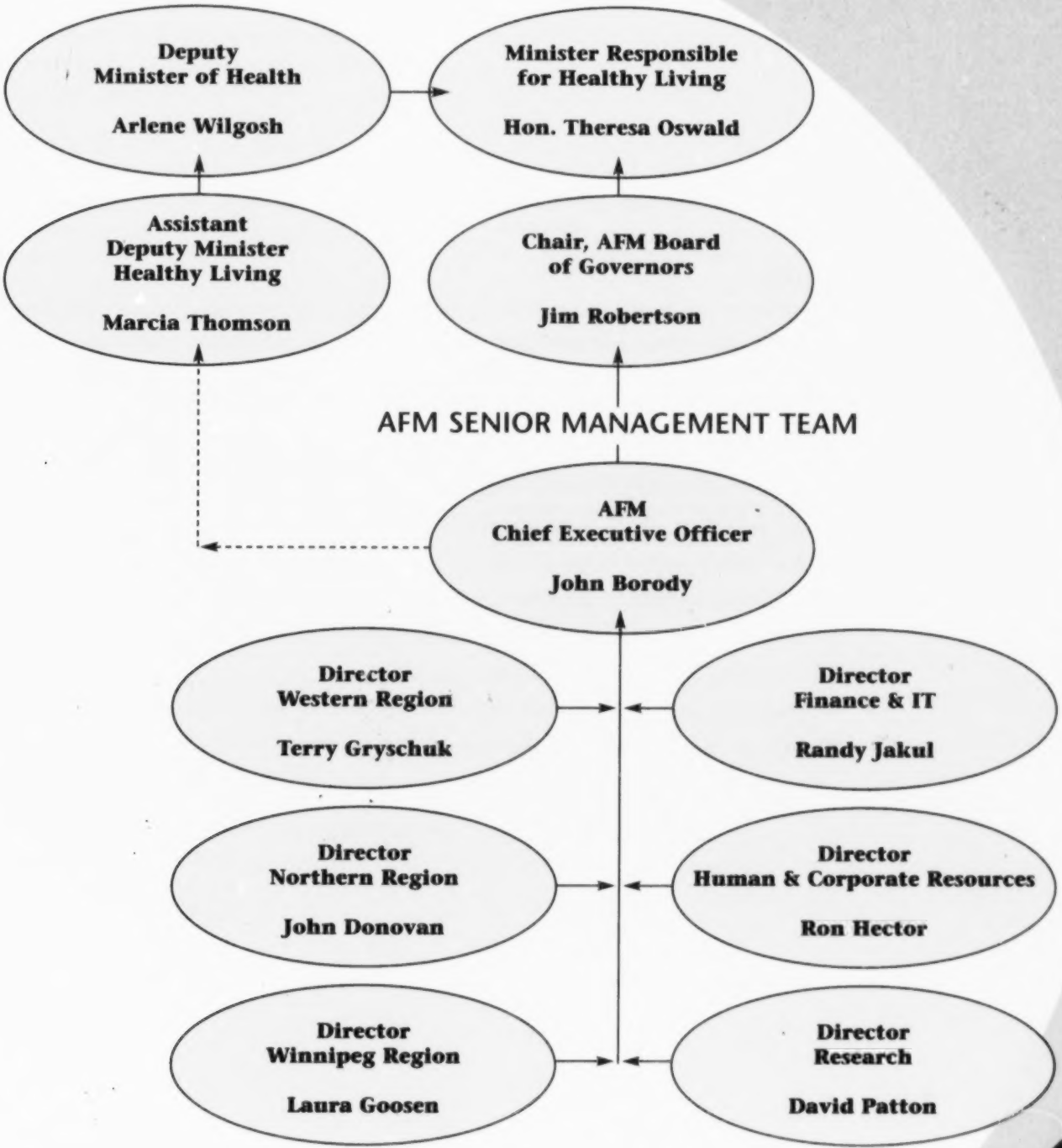
OVERVIEW

AFM ORGANIZATIONAL CHART 2004 – 2005



VISION, MISSION AND CORE VALUES

VISION

Leading the way to an addiction free society

MISSION

To contribute to the health and well being of Manitobans by reducing the harm associated with alcohol, other drugs and gambling through education, prevention, rehabilitation and research.

VALUES

- We respect the dignity of each individual
- We are guided by ethical standards and integrity
- We are client centered in our service
- We endorse relationships with the self-help community
- We contribute to the development and sustainability of healthy communities
- We encourage partnerships with other organizations
- We promote continuous improvement, lifelong learning, research and best practice
- We support early intervention and harm reduction

OVERVIEW

STRATEGIC DIRECTIONS

The AFM has developed the following corporate goals in support of its strategic direction. These goals guide the Agency's management, planning and operational activities.

STRATEGIC DIRECTION:
Balancing resources to identified needs

- To continue the renewal of adult rehabilitation programs.
- To enhance services for Manitoba youth in response to the Youth Substance Use Needs Assessment Report.
- To develop and enhance partnerships and collaborative working arrangements to ensure a continuum of service.
- To continue building capacity in the community through prevention and education.

STRATEGIC DIRECTION:
Enhancing clinical processes

- To have program development and improvement guided by outcomes and best practice.
- To determine the feasibility of providing clinical supervision.
- To better align service standards, clinical staff development and clinical practice.
- To welcome and respond to persons with co-occurring mental health and substance use and/or gambling issues.

STRATEGIC DIRECTION:
Affirming and building on our unique identity

- To continue leadership in the addictions field.
- To increase public awareness of the range of AFM services.
- To define the role of self-help in AFM programs.
- To build on provincial and national collaborations.

STRATEGIC DIRECTION:
Fostering a healthy work environment

- To be an employer of choice.
- To develop a respectful workplace program.
- To continue to promote employee health and well-being.

CORPORATE HIGHLIGHTS

***AFM continues to be seen** as a leader in the addictions field and builds on this role as **it achieves the goals related** to the Strategic Directions. This section highlights key programs **and projects that AFM** is involved with as they relate to the Strategic Directions.*

ACCREDITATION

Consistent with corporate strategic directions, the AFM was evaluated through the accreditation process of the Canadian Council on Health Services Accreditation (CCHSA) and was granted the status of *ACCREDITED*. No conditions or urgent recommendations were attached to the granting of this status. CCHSA has established national standards for Health Service organizations, as well as a process for evaluating an organization's compliance with these standards.

The accreditation process involved many staff and also included consultation with external partners. Initially, six teams were established with staff representation from all regions and all classifications: Leadership and Partnerships, Information and Management, Human Resources, Environment, Adult Substance Abuse and Problem Gambling, and Youth Substance Abuse and Problem Gambling. The Leadership and Partnership team included representation from the Board of Governors.

Achieving Through Measurement (AIM) is the core methodology used by CCHSA to evaluate organizations and, as the name suggests, emphasizes the use of indicators and measurements to substantiate and document performance. These were documented initially through a self assessment completed by the Accreditation Teams. This was followed with an evaluation by four external surveyors from CCHSA in February 2005 and included on-site visits to several facilities, as well as extensive interviews with the teams and regional offices.

The Accreditation Survey Report summarizes all this information and makes 11 recommendations for continued improvement of AFM programs and services. Most of the recommendations centered on improvements needed to the identification of performance indicators, the further development of risk management and disaster recovery plans, and the development of human resource succession plans. Work on responding to these recommendations has commenced.

The Accreditation process requires a re-evaluation in three years time.

STRATEGIC DIRECTION: *Balancing resources to identified needs*

Goal: To develop and enhance partnerships and collaborative working arrangements to ensure a continuum of service.

CODI (Co-occurring Disorders Initiative)

In March 2002, the Winnipeg Regional Health Authority, Manitoba Health and AFM undertook an initiative to restructure service provision for people with co-occurring mental health and substance use disorders. At that time, it was identified that changes needed to be made to both systems to improve service and that both addictions and mental health clinicians needed enhanced knowledge to support those with co-occurring disorders.

CORPORATE HIGHLIGHTS

Under the 2004-2005 AFM/Manitoba Health deliverables, the AFM co-occurring disorders initiative was to show evidence of improved access to services for Manitobans with (co-occurring) mental health and substance use disorders. Our action plan included the expansion of the CODI initiative to AFM's rural and northern services, consistent with the provincial action plan on implementing the principles of the Co-occurring Mental Health and Substance Use Disorders Initiative. As well, a mechanism to screen clients for co-occurring disorders was developed for implementation in the summer of 2005. AFM staff have received training in the CODI principles, which has been incorporated into AFM's new staff orientation training. Ongoing revisions to AFM Policies and Standards are being carried out to integrate the CODI Principles. Training modules were developed for training mental health and addictions professionals across the province on previously identified CODI Training Guidelines.

Fetal Alcohol Spectrum Disorder Evaluation

In the fall of 2004 AFM assisted with the evaluation of a new project designed to ensure that FASD-affected youth in conflict with the law receive appropriate judicial dispositions, including a formal diagnosis, improved access to services, and assistance in the identification and development of family oriented and community-based resources. Prior to this there was no framework to assess and diagnose youth with FASD. Judges had noted that some youth appeared before them many times, however, there was a lack of integration of services that could help to reintegrate the young person. Thus, a model that included case conferencing and improved communication among various systems that link with the justice system was developed and coordinated by The Interagency FAS Program operating from Mount Carmel Clinic.

AFM Research developed an evaluation framework and accountability model to examine this model. AFM research evaluated the progress made by the program and identified opportunities for improving the processes within the justice system that could facilitate reintegration. An interim evaluation identified some of the positive outcomes that have begun; however, recommendations also indicate that there is still much work to be done.

Collaborative Partnerships with Youth-Serving Agencies

In an effort to respond to some of the most marginalized youth within the city of Winnipeg, the AFM enhanced its relationship with two youth-serving agencies through the development of two off-site programs: a substance abuse program for sexually-exploited youth and a substance abuse program for youth with co-occurring issues.

- The AFM and the Transition Education and Resources for Females Program (TERF) joined together to co-facilitate a substance abuse group program for sexually exploited youth. This program, running out of New Directions for Families, Adults and Youth, assisted in breaking down barriers to meet the needs of this hard to reach population.
- Many youth with significant substance abuse concerns also struggle with issues related to their mental health. Through collaboration with the Manitoba Adolescent Treatment Center (MATC), the AFM co-facilitated a customized group program at MATC that recognizes the unique needs of this high risk population.

CORPORATE HIGHLIGHTS

7th Street Health Access Centre – Brandon

During the last year, AFM has been a key partner with the Brandon Regional Health Authority in service delivery from a one-stop service access point. The 7th Street Health Access Centre, located in downtown Brandon, targeted service provision to people who typically were poor consumers of health and related services. The AFM provided a complete range of community-based services, seven days per week, to both adult and youth clients experiencing difficulties related to alcohol, other drugs and/or gambling. As several partners operated out of the same facility, the ability to link clients to other key service providers (the Sexually Transmitted Infections Clinic, Mental Health Program, a physician, an advanced practice nurse) was enhanced.

Goal: To continue building capacity in the community through prevention & education.

Brandon School Division Drug & Alcohol Education Committee (BSDDAEC)

In June of 2004, the AFM, the Brandon School Division and community representatives formed a partnership to address the concerns of youth regarding the harmful effects of drug and alcohol use in the community. Brandon youth had identified drug use as a significant problem during their participation in the Suicide Prevention and Intervention Network "Power of One" workshop that was held in Brandon. The committee's purpose was to mobilize the community to reduce the harmful effects of alcohol and drug abuse and, in turn, provide Brandon youth with a safer school and community environment.

River East Transcona School Division

AFM developed a partnership with the River East Transcona School Division in a prevention and education initiative for which the purpose was: *"To develop the capacity of the School Division and its surrounding community to provide prevention, education and intervention services targeted to youth alcohol, other drugs and gambling issues."*

AFM's key areas of responsibility were:

1. To reduce harmful alcohol, other drug and gambling-related behaviour.
2. To increase students' capacity to use positive coping skills with regard to family-related alcohol, other drug and gambling behaviour.
3. To increase parents', teachers' and counsellors' capacity to help youth reduce harmful alcohol, other drug or gambling-related behaviour.

Results:

- Students improved decision-making skills.
- Students were more aware that they could not control the drinking/gambling behaviour of their family members.
- Students increased their knowledge of community supports.
- Parents felt more knowledgeable and confident in dealing with their child who was experiencing AODG problems.
- The presence of Community Addictions Workers has been positive in their schools.

Recommendations:

1. More resources are necessary to allow for more time in each school.
2. Develop a regular time schedule for Community Addictions Workers at each school.
3. Develop a process to better link with parents.
4. Expand the program to all schools in the River East Transcona School Division.

CORPORATE HIGHLIGHTS

STRATEGIC DIRECTION: *Enhancing clinical processes*

Goal: To have program development and improvement guided by outcomes and best practice.

Continuum of Services

As part of an approved one year pilot, group programming has been altered within the community-based office to further enhance services offered to youth who are attempting to make changes surrounding their harmful use of alcohol or other drugs. This pilot is part of an ongoing commitment by youth staff to explore avenues for providing a spectrum of services across the continuum of universal, selected and indicated prevention strategies.

Goal: To better align service standards, clinical staff development and clinical practice.

Clinical Supervision in Youth Programs

In July 2001, the AFM chose to explore the utilization of a clinical supervision model that resulted in the development of a dedicated clinical supervisor within the Compass Youth Residential Program. In the fall of 2003, this model was expanded to include a designated clinical supervisory position within the Youth Community-based programs in Winnipeg Region.

With the leadership and support of the AFM clinical supervisors, AFM youth staff are provided with ongoing feedback, guidance and training to continue to enhance their clinical skills and ultimately the services offered to AFM youth clients.

In addition to being a resource to youth staff, the clinical supervisors contribute to the continued development and enhancement of youth programming within the Winnipeg region and, ultimately, to best practice in the addictions field.

The AFM is committed to the principles of the clinical supervision model and continues to explore avenues for further implementation of this model into other program areas throughout the Province.

STRATEGIC DIRECTION: *Affirming and building on our unique identity*

Goal: To continue leadership in the addictions field.

Middle Years Gambling Education Program

"It's Your Lucky Day", a multi-media presentation for grade 7 and 8 students, was widely available beginning in the fall of 2004, along with a complementary website (www.luckyday.ca). In response to AFM's commitment to provide services to the Francophone population, Manitoba Lotteries Corporation funded a French language version of the website and the presentation entitled « C'est ton jour de chance ». Students from 23 schools in the Division scolaire franco-manitobaine, as well as in immersion schools throughout the province, benefit by learning about gambling – from how it works to the potential risks involved – in their language of instruction. AFM has demonstrated leadership in developing this innovative prevention program in both English and French. By providing a bilingual website, the gambling information aimed at middle years students will be available both nationally and internationally and is gaining widespread recognition as a result.

CORPORATE HIGHLIGHTS

William Potoroka Memorial Library

The AFM Library has continued to provide leadership in the following ways:

- ***Community Connections Initiative*** – As a partner in the Community Connections Program, the Library is host to a multi-station, free public access Internet site. Federal/ Provincial funding has made this "on-ramp" to the Information Highway possible for Library patrons, local neighbourhood residents and community-based programs and services. Users can expand their knowledge and access government services and programs through such activities as: on-line research, e-mail communication, school assignments, developing resumes and undertaking job searches.
- ***Harm Reduction and Sex Trade and Sexual Exploitation Special Collections*** – In collaboration with the Manitoba Harm Reduction Network and the Department of Family Services and Housing, Prevention & Intervention of Child & Youth Sexual Exploitation, two special collections have been established and will be further developed within the AFM Library. The Harm Reduction Collection includes resources on: policy and programs, at-risk populations, injection drug use, methadone, hepatitis C and HIV/AIDS. The Sex Trade and Sexual Exploitation Collection includes resources on: sexual abuse, sexually exploited youth, adult sex workers, sex trade trafficking, child sex tourism, sexual addiction and the sex trade and substance use.

Responding to Illicit Drug Use

In 2004 awareness of abuse of the drugs OxyContin and methamphetamines was realized as a potential for local concern. AFM responded to the increasing prevalence of these drugs in the following ways:

- Incorporation of information in AFM presentations.
- Attendance by AFM staff at the Vancouver Summit for Methamphetamine Abuse and at the Saskatoon Conference on Methamphetamine Treatment.
- Media exposure featuring AFM expertise surrounding prevention, education and rehabilitation.
- The application of pharmacological intervention in the mine. program, where it has been determined that approximately 50% of clientele have had prior involvement with OxyContin.
- Awareness by counselling staff of some of the unique implications of working with these populations.

Goal: To increase public awareness of the range of AFM services.

Print Ads

In November 2004 four new advertisements were developed, which were also printed as bookmarks. These ads have been widely used as public service announcements in newspapers throughout the province.

Asian Gambling Ads

New gambling ads were also developed for the Asian market. A series of consultations with various media groups in the Filipino, Chinese and Vietnamese community resulted in one ad being developed for all the papers. Ads were purchased and ran:

- on a rotating monthly basis for the Filipino community (The Filipino Journal, the Philippines Times and Ang Peryoliko).

CORPORATE HIGHLIGHTS

- monthly in two community newspapers for the Chinese community (the Indochina Chinese News and MB China Times), and quarterly in two community magazines (the Mandarin World View and the MB China Tributes).
- on a quarterly basis for the Vietnamese community (the Huong Xua magazine).

Seniors Affected By Someone Else's Gambling

The third year of this campaign was completed. It included billboard placements in Brandon, Selkirk, The Pas and Dauphin and bus signs in Brandon. A page was purchased in the "Protect Yourself" calendar developed by the Senior Crime and Safety network chaired by Manitoba Government.

There is More to Life Than Debts, Worries and Hanging on the Hope of a "Big Win"
Gambling can be a problem. If you're worried about it, talk to someone you can trust. Call the Problem Gambling Helpline at 944-6382.
DONT LET SOMEONE ELSE'S GAMBLING...
BECOME YOUR LOSS.
Set the good years free
CALL THE Problem Gambling Helpline 1-800-463-1554
賭博足以影響家庭生活
你是否因賭博而變得對家庭福利毫不關心，夫妻關係面臨破裂嗎？如果你或家人親身感受到賭博的負面影響，你可以向專業人士求助或傾談賭博問題。
緬省的免費「賭博熱線」是專為賭徒及家人提供有關賭博上的問題、預防及援助服務，一切談話內容是絕對保密，而且為有語言困難的人士提供免費電話翻譯服務。
請電賭博熱線 944-6382
在溫尼伯市外的人士請電
1-800-463-1554
ADDICTIONS FOUNDATION OF MANITOBA
Who is the impaired driver?
Alcohol abuse knows no gender or age barrier and can cause pain to everyone. Anyone in your family can be affected.
Reclaim your life. If problem drinking is threatening your family, look to the AFM.
944-6200
Who is the drug abuser?
The abuse of prescription medications or addiction to illegal drugs can have an effect on any age, gender or social-group. It can affect anyone in your family.
Reclaim your life. If drug abuse is harming your family, count on the AFM.
Who is the problem gambler?
Gamblers' problems aren't always obvious. When gambling becomes more than a game, there can be serious financial, emotional and health consequences for the entire family.
Reclaim your life. If problem gambling is a worry for your family, count on the AFM.
1-866-767-3838
ADDICTIONS FOUNDATION OF MANITOBA
www.afm.mb.ca
Who's the loneliest in this family?
Is it the person with the problem drinking or drug use or other family members? Not talking about the problem, not trusting anymore can destroy families.
Reclaim your life. If your family life has been damaged by addiction, count on the AFM.
1-866-291-7774
ADDICTIONS FOUNDATION OF MANITOBA
www.afm.mb.ca

CORPORATE HIGHLIGHTS

Goal: To define the role of self-help in AFM programs.

The Role of Self-Help in AFM Rehabilitation programs

A key element of rehabilitation is to provide clients with the opportunity to connect to community supports, such as self-help and EAP. The role of self-help in AFM rehabilitation programs is as an external resource specific to client on-going recovery needs.

In September 2004 the AFM defined the role of self-help in its programs. There was evidence that the term itself needed to be defined as it related to AFM's mandate. This was largely due to the increasing variety of self-help options available, particularly as they relate to Mental Health and AFM's particular involvement in the CODI Initiative. The definition was limited to credible and realistic options with specific characteristics designed to meet the recovery needs of AFM's clients.

Members of the Adult Provincial Planning Team submitted and had approved the following definition of self-help:

Self-help, as it relates to the AFM's mandate, is self-directed community-based support that contains some or all of the following elements:

- *Credibility through organization and recognition.*
- *Focus on a common personal problem shared by members.*
- *Provides a process to effect and support healthy lifestyle changes.*
- *Supports individual recovery goals.*
- *Includes mentoring – a process whereby individual members have access to a sponsor or long-time members of the group who will serve as a role model, teacher, advisor and/or friend.*
- *Promotes self-awareness.*
- *Involves peer exchange – a process whereby group members share their experiences, ideas and solutions with each other for mutual benefit.*

Goal: To build on provincial and national collaborations.

The Canadian Addiction Survey

The Canadian Addiction Survey (CAS) is the first national survey devoted to alcohol and other drug use since 1994. The 100-page detailed CAS report provides an in-depth national and province-by-province look at how Canadians use alcohol, cannabis and other drugs and the impact these substances have on their lives. The report also examines differences in rates of consumption and harm since the 1994 *Canada's Alcohol and Other Drugs Survey* (CADS) and the 1989 *National Alcohol and Other Drugs Survey* (NADS). Highlights of the CAS were released on November 24, 2004.

The CAS revealed a rise in alcohol and cannabis use since 1994, with Canadians under the age of 25 accounting for much of the increase and problematic use. The detailed report also outlined self-reported harms that individuals attribute to their use of alcohol and drugs, including problems with friendships and social life, physical health, home life and marriage, work and studies, financial well-being, legal matters, housing and learning.

A total of 13,909 Canadians participated in the CAS, with a minimum of 1,000 in each province. The CAS is a collaboration of Health Canada, the Canadian Executive Council on Addictions (CECA), which includes the Canadian Centre on Substance Abuse (CCSA), the Alberta Alcohol and Drug Abuse Commission (AADAC), the Addictions Foundation of Manitoba (AFM),

CORPORATE HIGHLIGHTS

the Centre for Addiction and Mental Health (CAMH), Prince Edward Island Provincial Health Services' Authority, and the Kaiser Foundation/ Centre for Addictions Research of BC (CAR-BC), and the provinces of Nova Scotia, New Brunswick and British Columbia.

Canadian Health Network (CHN)/ Le Réseau canadien de la santé (RCS)

The Canadian Health Network (CHN)/ Le Réseau canadien de la santé (RCS) – a national, bilingual, Internet-based health information service – provided access to timely, reliable and authoritative health information to Canadians. The CHN operates as a national partnership between Health Canada, other departments of the federal government, provincial and territorial governments, libraries, universities and more than 700 non-profit organizations. Over the past year, AFM maintained its high profile within the newly expanded Substance Use/Addictions Affiliate, which now includes the management of Tobacco resources, collection development and promotion.

During the sixth year of this partnership, AFM continued to participate in the expansion of the CHN database to 17,000 electronic resources. In addition, AFM lead the Affiliate's activities in the marketing and promotion of the CHN, with specific emphasis on the strategic initiative to reach potential audiences in rural, remote and Northern venues throughout the country.

STRATEGIC DIRECTION: *Fostering a healthy work environment*

Goal: To continue to promote employee health and well-being.

The Workplace Safety and Health Program was approved by the Board of Governors and is being implemented on a province-wide basis. Workplace Safety and Health Committees have been established in the Winnipeg, Northern and Western Regions. Initial training for mangers, supervisors and committee members has been completed throughout the province. All committees are now in the process of adapting the AFM Workplace Safety and Health Program to their local procedures and protocols. AFM is also benefiting from a partnership with three individuals who have received a WCB grant to work with Workplace Safety and Health Committees. This project will help AFM assess safety and health needs in the workplace, develop appropriate training workshops and develop, introduce and use evaluation tools to assist committees.

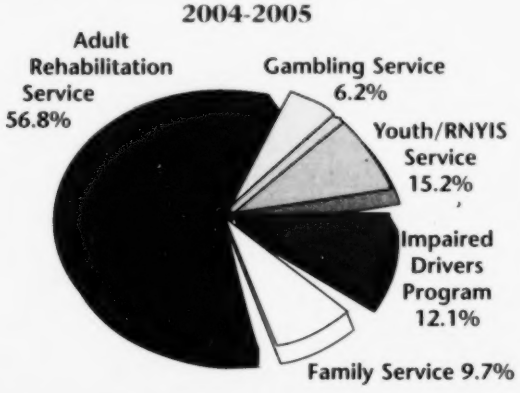
AFM SERVICES OVERVIEW

AFM continues to provide a variety of diverse services to Manitobans as evidenced by this section. Some of these services have been regularly provided over the years, others have been enhanced, and yet others have been introduced for the first time. All of them contribute to implementing best practises in addictions and to linking to the new Strategic Directions that AFM has developed.

REHABILITATION SERVICES

Rehabilitation Services

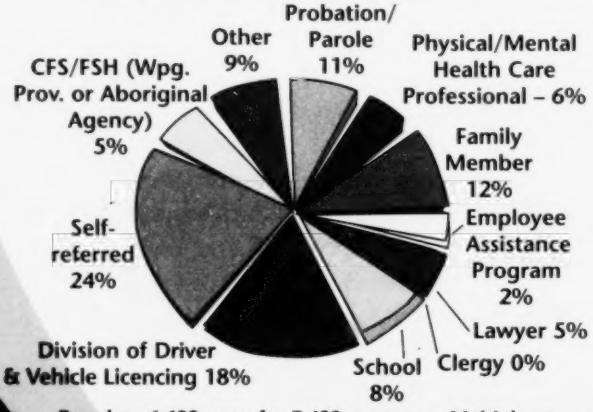
Five **core rehabilitation** services are available throughout the province. This fiscal year, 9,199 individuals were involved in 14,569 program admissions.



Referral Sources

Following is a chart that demonstrates the various organizations that refer clients to AFM.

2004-2005 Referral Sources



Based on 6,692 cases for 7,489 responses. Multiple responses are allowed. Based on Core Intake and Youth Intake.

Adult Rehabilitation Services

The AFM has the largest and most diversified complement of rehabilitation programs in the province for adults with alcohol, other drug use or gambling problems. A total of 4,728 individuals participated in Adult Rehabilitation programs in 2004-2005.

Problem Gambling Services

AFM provides services to both gamblers and their families. The program provided service to 467 problem gamblers and to 76 family members. A 1-800 help line allows 24 hours a day, seven days a week, contact with AFM staff. A total of 2,788 calls were handled in 2004-2005. These calls addressed issues for those individuals experiencing problems with their gambling, as well as those affected by problem gamblers.

Responsible Gaming Information Centre

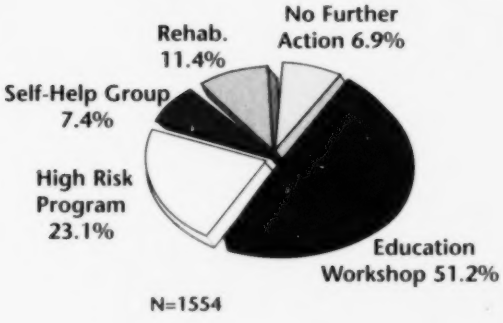
Following a successful pilot project at McPhillips Street Station Casino, another Responsible Gaming Information Centre has been opened at Club Regent Casino. These two centres have become an important source of information for gamblers. Ontario has announced the opening of similar centres based on the Manitoba model. AFM staff provided on-site education, support and referral for gambling related problems to 459 casino guests in the past year. Approximately 1,700 other guests visited the "Open Houses" to learn how slot machines and other forms of gambling work.

AFM SERVICES OVERVIEW

Impaired Drivers Program

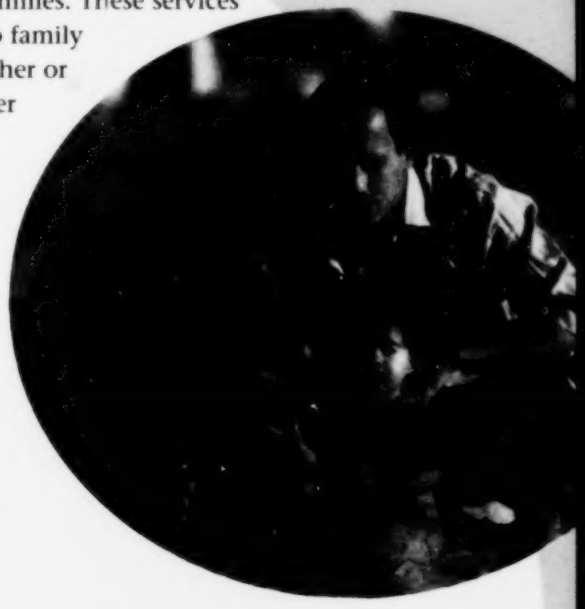
AFM's Impaired Driver's Program is an excellent example of a cost recovery harm reduction program. It has been recommended as an effective model for intervening with both first time and repeat offenders. This year 1,708 offenders accessed the program. The chart below identifies the referrals which were made.

Impaired Drivers Program Referrals: 2004-2005



Family Services

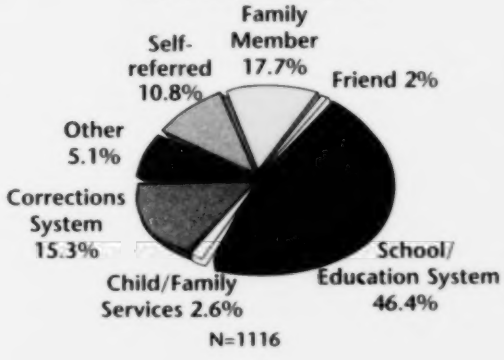
Substance abuse and problem gambling can have devastating results for families. A varied group of programs are offered to assist and support families. These services are available to family members whether or not the member experiencing addiction problems is receiving service. In 2004-2005, AFM worked with 813 family clients.



Youth Rehabilitation Services

Issues related to providing services for youth are different from adults. Adolescence is a unique stage of life, and special consideration is given to meet the needs of this target group. The AFM effectively responds by providing a range of rehabilitation services, guided by best practices, targeted to the unique needs of Manitoba's youth.

2004-2005 Youth Service Clients Referral Sources



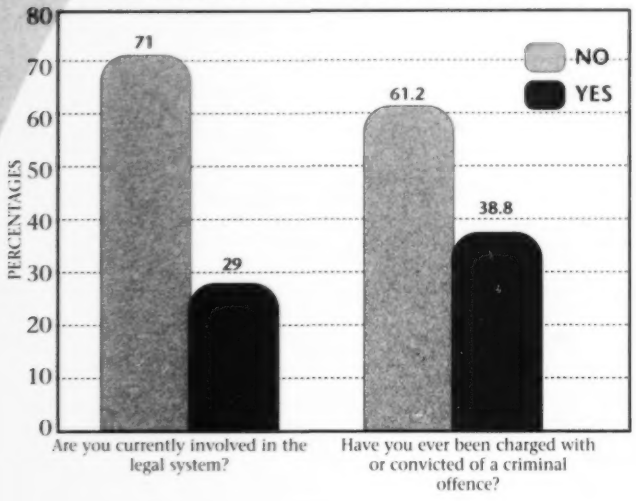
AFM SERVICES OVERVIEW

Profile of Youth Clients

Here is a profile of the youth client who accessed AFM services this fiscal year:

- **Average age** was 15.57 years.
- **60.1% were** male and 39.9% were female.
- **85% were** students and 15% were not students at the time of their involvement with AFM.

2004-2005 Youth Service Clients



Youth Community-based Rehabilitation Services

This program offers a range of individual and group counselling sessions to youth 12-18 years inclusive. Partnerships continued between the AFM and the Departments of Justice and Family Services that have resulted in the AFM being better able to respond to the needs of hard-to-reach youth. Family therapy services are offered to adolescent clients and their families within the Winnipeg region at the community-based office in downtown Winnipeg. Bilingual services are also available in the Winnipeg area.

Youth School-based Programs

Initially, the Rural and Northern Youth Intervention Strategy (RNYIS) program was implemented to provide on-site education/assessment and counselling service to students in 23 rural and northern schools. AFM has since expanded this program to 35 rural schools. In addition, 19 Winnipeg schools receive on-site counselling services for their students operating through two continuing projects. The AFM also continues to partner with the Portage la Prairie School Division by delivering alcohol and drug learning resources to all Grade 7 and 8 students within this division.

The AFM hosted its fourth Provincial Student Assistance Program Conference in Winnipeg. AFM school-based counsellors, along with their partnered schools, were provided with a broad scope of information geared to assist in the prevention and early intervention of substance use and other risk behaviours within student populations.

Compass Residential Youth Program

Compass is an eight-week rehabilitation program for adolescents 13-17 years old who are experiencing significant problems with their use of alcohol or other drugs. A licensed child care facility located near Portage La Prairie, Compass offers a safe and therapeutic environment for young people who recognize that their drug use is a primary problem and who want to make changes but have been unable to do so with the resources available to them in their community.

Compass offers a full range of programming, including group and individual counselling, leisure education, recreation, learning program, health education, exposure to self-help supports and family support. The multi-disciplinary team includes counsellors, nurses, youth care workers, a learning coordinator and leisure consultant. On-site medical and psychological services are available.

AFM SERVICES OVERVIEW

PREVENTION & EDUCATION

Adult Education Services

A wide variety of prevention and education services are provided across the province. In 2004-2005, AFM staff delivered 2,627 prevention/education activities that were attended by 39,878 individuals for an average of 15.1 participants per activity.

Province-wide, AFM provided standardized, non-standardized and customized training to the community at large. A total of 54 standardized courses were offered to 640 participants.

Prevention Education Consultants continued to plan, develop and deliver formal courses, workshops and seminars to the general public and to private and public organizations. Some of the highlights of this year include the development of course curriculum and lesson plans for Assiniboine Community College, the design and delivery of a pharmacology course and textbook for the Department of National Defense, the development and delivery of an AFM staff orientation program, the development of the CODI Basics course for professionals working with mental health clients, and the delivery of a train the trainer skill development workshop for provincial NADAP workers.

The Educator Series

The Prevention Education Consultants from the Youth Unit provided a series of 10 workshops, dealing with a variety of topics, to educators and other youth allied professionals. The series of workshops are called "The Educator Series" and are marketed to guidance counsellors at schools within Winnipeg as well as partner schools within Winnipeg Region and to all youth serving agencies within the city of Winnipeg. In total, over 200 people participated in these 10 workshops this past year.

RESEARCH

The role of research at the AFM is twofold: to evaluate current programs and pilot projects; and to facilitate research that will provide AFM with insight into issues related to alcohol, other drugs and gambling. As part of evaluating current programs and pilot projects, the following reports were completed:

- Manitoba Youth Gambling Behavior: Follow-up to the 1999 AFM Report
- An Evaluation of the AFM Manitoba Problem Gambling Residential Rehabilitation Program
- It's Your Lucky Day: Program Evaluation
- Evaluation of the Grade 5 Substance Abuse Prevention Program in Brandon
- Evaluation of the Middle Years Prevention Project in the St. James/Assiniboia School Division
- Evaluation of the Introduction of a Rehabilitation Counsellor in the St. James/Assiniboia School Division
- Evaluation Report on the Partnership between River East Transcona School Division and the AFM

In addition, the Annual Statistical Report, which summarizes various activities that are conducted by staff across the province, was provided to government and made available to all staff on the local network.

Work on the National Addiction Survey was completed, and the Director assisted in the data analysis and writing of the report, as well as with the press conferences that followed. An annual report on the drug use situation in Winnipeg was submitted to the Canadian Community Epidemiology Network on Drug Use (CCENDU).

AFM SERVICES OVERVIEW

CORPORATE RESOURCES

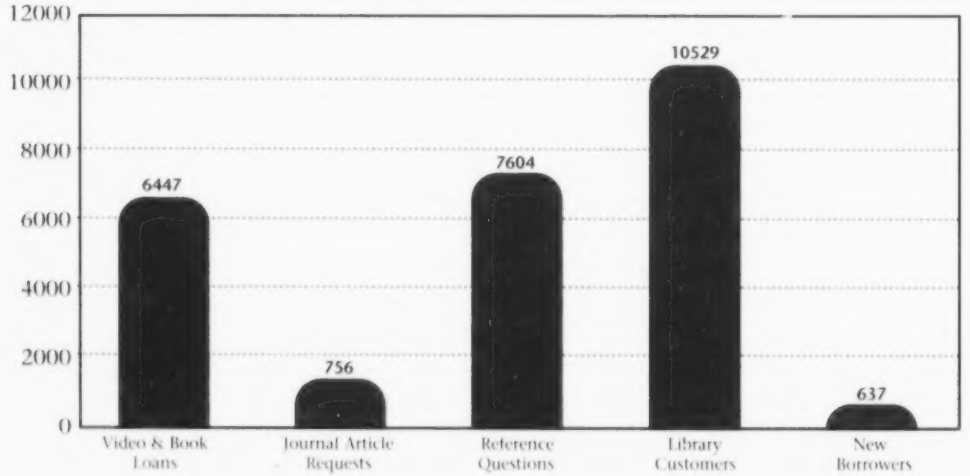
Corporate Resources provides services to reduce the harms associated with addictions through education, the innovative development and effective delivery of information, and community mobilization. Following are a variety of services provided.

William Potoroka Memorial Library

AFM Library provides Manitobans from all walks of life and from all parts of the province with resources and services that can assist with personal/family challenges, educational programming, health care/social service provision, workplace issues, and prevention/rehabilitation program development, support and enrichment. The Library provides free, province-wide access to over 5,774 books, 1,140 audio-visual resources, 95 professional/academic journals and newsletters, and it operates as the distribution centre for AFM publications. Strong demand for resources and services continued in 2004-2005, with: 6,447 resources circulated, 7,604 reference questions answered, 756 journal article and interlibrary loan requests filled and 1,033 information/orientation packages – including brochures, booklets, reports, bibliographies and fact sheets – distributed.

This year the Library achieved its highest level of use, with 10,529 customers served. Over 80% of the 11,072 Manitobans registered as borrowers are members of the public, and the user group continued to grow this year with the addition of 637 new Library patrons. An active outreach program, which promotes Library resources and services, provided 19 customized in-depth Library orientations to specialized groups and reached thousands of potential customers through 13 conference and workshop presentations/ displays. The Library component of AFM's Web site was updated, and an electronic format of the Audio-visual Catalogue was included.

2004-2005 Library Activity by Type



AFM SERVICES OVERVIEW

Manitoba Addictions Awareness Week (MAAW) Committee

AFM Library coordinated the content development, design, translation and publication of the 2004-2005 MAAW Resource Kit. Produced in English and French, 2,175 of these free kits were distributed in September to Manitoba schools, communities and workplaces. New features this year were: the Canadian Health Network Scavenger Hunt, Disordered Eating and Workplace Wellness. In partnership with Manitoba Textbook Bureau, additional kits were made available for sale to other jurisdictions; the Department of National Defense purchased sufficient copies in English and French for bases in other provinces.

Information Technology (IT)

Activities that continued to stabilize, upgrade and enhance the security of the network were the priority for the past year in Information Technology. Six new servers were installed and network operating systems were upgraded to the latest versions. Systems Management Server software was installed to facilitate centralized management of workstations, remote troubleshooting and inventory/ license reporting.

The five legacy databases were upgraded and programmed into one Corporate Database. All staff have read-only access, with select staff having edit access in each region where required.

Marketing

Public service announcements have appeared on a monthly basis in the two major Winnipeg newspapers, totaling 104 advertisements. Thirty-seven of these promoted AFM courses and 77 were the standard AFM ad.

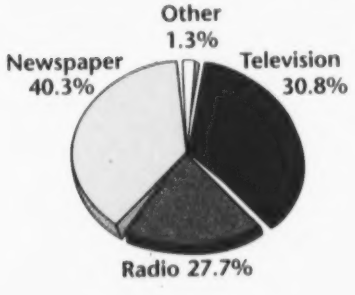
Gambling TV ads were purchased for two TV stations. For each ad purchased, AFM received an additional one free.

Media Services

A media event was held in November 2004 for the release of the Canadian Addictions Survey results.

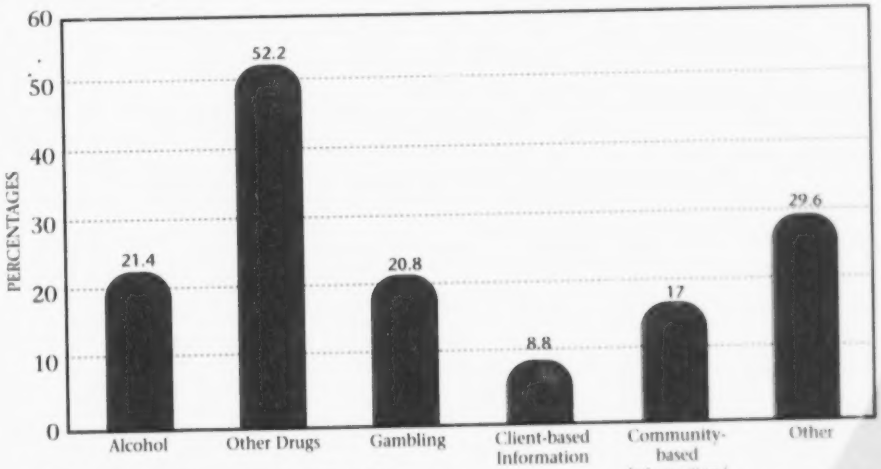
The charts below illustrate the breakdown of the various types of media contact with AFM and the topics covered in interviews provided to these groups.

2004-2005 AFM Media Tracking: Media Type



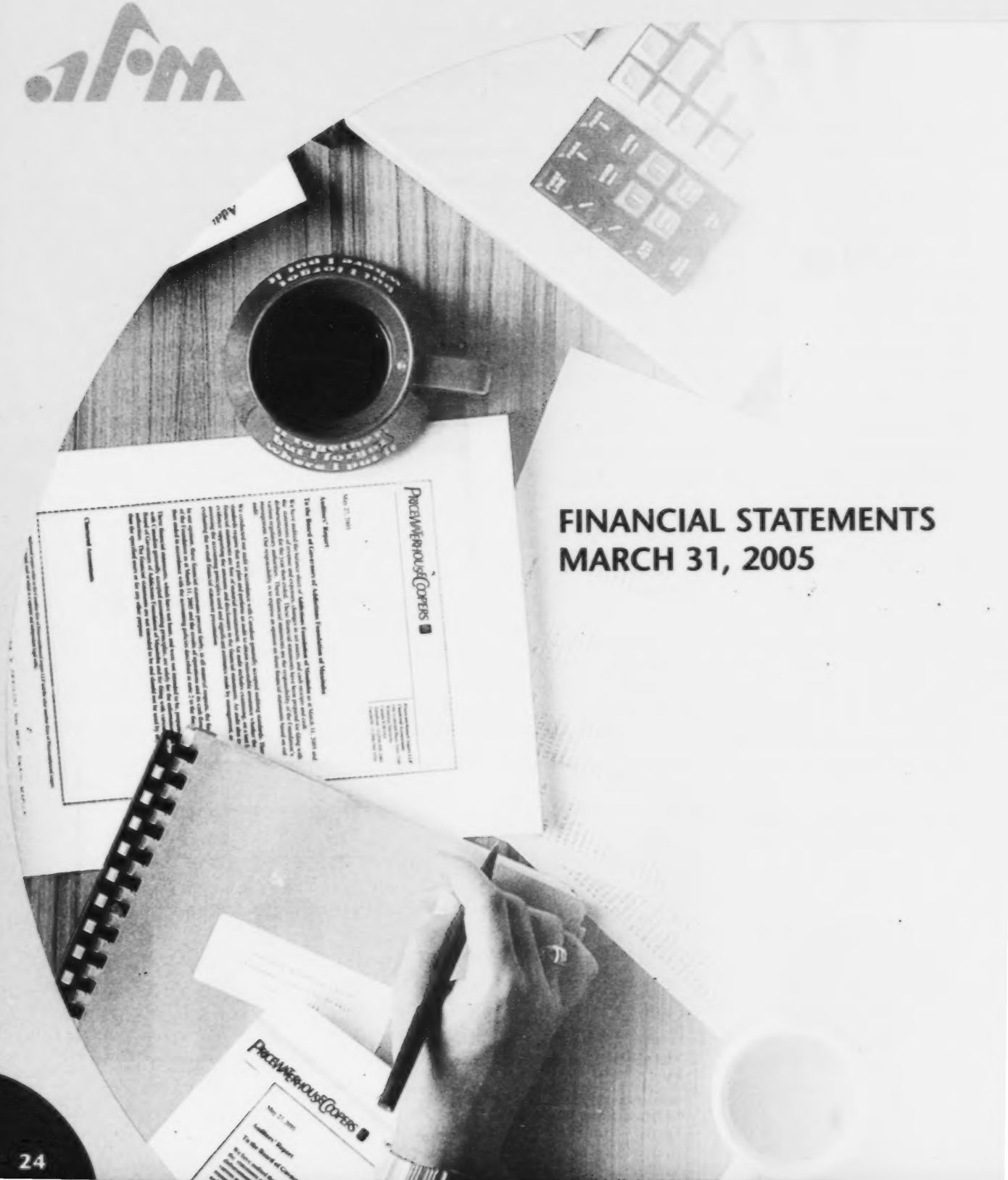
N=159

2004-2005 AFM Media Tracking: Topic of Contact



Totals based on 238 responses for 159 cases.
Multiple responses are allowed.

FINANCIAL STATEMENTS



FINANCIAL STATEMENTS
MARCH 31, 2005

FINANCIAL STATEMENTS

FINANCIAL STATEMENTS AND AUDITED REPORTS

ADDICTIONS FOUNDATION OF MANITOBA

(incorporated under the laws of Manitoba)

Financial Statements
March 31, 2005

The accompanying financial statements are the responsibility of management and have been prepared in accordance with accounting policies stated in Note 2 to the financial statements. In management's opinion, the financial statements have been properly prepared within reasonable limits of materiality, incorporating management's best judgement regarding all necessary estimates and all other data available.

Management maintains internal controls to provide reasonable assurance of the reliability and accuracy of the financial information and that the assets of the Foundation are properly safeguarded.

The responsibility of the Auditor and their staff is to express an independent professional opinion on whether the financial statements are fairly presented. The Auditor's report outlines the scope of the audit examination and provides the audit opinion.

Chief Executive Officer

Director, Finance

August 24, 2005

Date

FINANCIAL

PRICEWATERHOUSECOOPERS

PricewaterhouseCoopers LLP
Chartered Accountants
One Lombard Place, Suite 2300
Winnipeg Manitoba
Canada R3B 0X6
Telephone +1 (204) 926 2400
Facsimile +1 (204) 944 1020

May 27, 2005

Auditors' Report

To the Board of Governors of Addictions Foundation of Manitoba

We have audited the balance sheet of **Addictions Foundation of Manitoba** as at March 31, 2005 and the statements of revenue and expenses, changes in net assets, and cash receipts and cash disbursements for the year then ended. These financial statements have been prepared for filing with various regulatory authorities. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Foundation as at March 31, 2005 and the results of operations and its cash flows for the year then ended in accordance with the accounting policies described in note 2 to the financial statements.

These financial statements, which have not been, and were not intended to be, prepared in accordance with Canadian generally accepted accounting principles, are solely for the information and use of the Board of Governors of Addictions Foundation of Manitoba and for filing with various regulatory authorities. The financial statements are not intended to be and should not be used by anyone other than the specified users or for any other purpose.

PricewaterhouseCoopers LLP

Chartered Accountants

PricewaterhouseCoopers refers to the Canadian firm of PricewaterhouseCoopers LLP and the other member firms of PricewaterhouseCoopers International Limited, each of which is a separate and independent legal entity.

Addictions Foundation of Manitoba

(incorporated under the laws of Manitoba)

Balance Sheet

As at March 31, 2005

	2005 $	2004 $
Assets		
Current assets		
Cash	2,224,747	2,293,882
Accounts receivable	256,591	195,305
Prepaid insurance	15,762	14,697
Total current assets	2,497,100	2,503,884
Capital assets (note 3)	2,806,384	2,759,509
Province of Manitoba vacation pay receivable (note 2)	667,567	667,567
Province of Manitoba severance pay receivable (note 2)	1,153,316	1,153,316
Province of Manitoba long-term pension funding commitments (note 2)	13,283,538	12,344,417
Total non-current assets	17,910,805	16,924,809
Total assets	20,407,905	19,428,693
Liabilities		
Current liabilities		
Accounts payable and accrued liabilities	1,009,314	899,575
Accrued vacation pay (note 2)	960,921	940,611
Deferred contributions (note 4)	85,600	46,700
Total current liabilities	2,055,835	1,886,886
Accrued severance pay (note 2)	1,482,172	1,435,499
Provision for employee pension benefits (note 2)	13,283,538	12,344,417
Total non-current liabilities	14,765,710	13,779,916
Total liabilities	16,821,545	15,666,802
Net Assets		
Net assets invested in capital assets	2,806,384	2,759,509
Net assets internally restricted (note 5)	937,600	1,179,800
Unrestricted net assets	(157,624)	(177,418)
	3,586,360	3,761,891
	20,407,905	19,428,693

Approved by the Board of Governors

Chairman

Boyd G. Kramble

Treasurer

Addictions Foundation of Manitoba

Statement of Revenue and Expenses

For the year ended March 31, 2005

	2005 $	2004 $
Revenue		
Government of the Province of Manitoba operating grant	12,890,000	12,834,700
Government of the Province of Manitoba long-term pension revenue (note 2)	848,864	930,242
Other revenue		
Impaired Drivers Program fees	646,742	642,638
Manitoba Lotteries Corporation Funding	2,052,417	2,027,000
School Support Program	308,900	330,300
Recovery of wages, medical and treatment services and travel expenses	825,678	842,596
Training course fees	93,000	96,984
Donations	24,125	18,248
Interest	45,950	70,661
Property rental	33,037	27,180
Manitoba Health capital funding	264,200	81,980
Parking rentals	20,832	17,890
Manitoba Government and General Employees' Union	-	6,627
Miscellaneous	12,663	17,212
Conferences	21,605	17,410
Youth Residential Programs	355,450	296,949
	18,443,463	18,258,617
Expenses (Schedule)	18,618,994	17,942,156
Excess (deficiency) of revenue over expenses	(175,531)	316,461

Addictions Foundation of Manitoba

Schedule of Expenses

For the year ended March 31, 2005

	2005 $	2004 $
Salaries	9,755,066	9,511,209
Wages	2,142,983	1,935,072
Advertising and exhibits	97,522	69,548
Amortization	187,722	185,210
Audio-visual aids	1,589	32,560
Audit	11,625	10,250
Board of Governors' honorarium	16,755	17,928
Books, newspapers and periodicals	32,216	33,952
Courier and freight	30,656	26,364
Educational literature	109,425	147,808
Employee benefits	1,099,636	1,035,975
Fees	507,031	435,310
Food supplies	309,732	304,405
Health and post secondary education tax levy	258,474	235,236
Household supplies	75,919	75,942
Materials, repairs and maintenance	561,062	605,613
Medical services and supplies	268,945	249,275
Miscellaneous	5,330	19,946
Pension (note 2)	1,493,968	1,394,975
Postage and telephone	273,412	290,243
Printing, stationery and office supplies	250,293	261,285
Rent, insurance and property taxes	356,698	354,743
Staff development	79,596	53,997
Training	29,299	18,898
Transportation of patients	15,564	17,762
Travel and automobile	437,470	411,407
Utilities	211,006	207,243
	18,618,994	17,942,156

Addictions Foundation of Manitoba

Statement of Changes in Net Assets

For the year ended March 31, 2005

	Invested in capital assets $	Internally restricted $	Unrestricted $	2005 Total $	2004 Total $
Balance - Beginning of year	2,759,509	1,179,800	(177,418)	3,761,891	3,445,430
Excess (deficiency) of revenue over expenses	(187,722)	-	12,191	(175,531)	316,461
Investment in capital assets	234,597	-	(234,597)	-	-
Internally imposed restrictions (note 5)	-	(242,200)	242,200	-	-
Balance - End of year	2,806,384	937,600	(157,624)	3,586,360	3,761,891

Addictions Foundation of Manitoba

Statement of Cash Receipts and Cash Disbursements

For the year ended March 31, 2005

	2005 $	2004 $
Cash provided by (used in)		
Operating activities		
Cash receipts from the Government of the Province of Manitoba	12,890,000	12,834,700
Other cash receipts	4,682,213	4,439,014
Cash paid to employees and suppliers	(17,406,751)	(16,210,651)
	165,462	1,063,063
Investing activities		
Purchase of capital assets	(234,597)	(30,061)
Excess (deficiency) of cash receipts over cash disbursements	(69,135)	1,033,002
Cash - Beginning of year	2,293,882	1,260,880
Cash - End of year	2,224,747	2,293,882

Addictions Foundation of Manitoba

Notes to Financial Statements

March 31, 2005

1 Nature of the Foundation

The Foundation is incorporated under the Addictions Foundation of Manitoba Act. The Foundation is the provincial authority responsible for providing prevention, education and treatment programs related to addictions to individuals and communities; for conducting research into the negative effects of addictions; and in so doing, for promoting the health and well-being of Manitobans. In this respect, the Foundation is dependent upon funding from the Government of the Province of Manitoba. The Foundation is a registered charity within the meaning of the Income Tax Act.

2 Significant accounting policies

The financial statements have been prepared in accordance with the significant accounting policies as set out below. Transactions and balances not specifically addressed by these accounting policies have been accounted for in accordance with Canadian generally accepted accounting principles.

Basis of accounting

The primary purpose of these financial statements is to meet the requirements of the Addictions Foundation of Manitoba Act to produce an annual report and to meet the specific needs of the Province of Manitoba (the Province). Therefore, these financial statements are not for a general purpose and as such were not intended to be prepared on the basis of Canadian generally accepted accounting principles (GAAP). The Foundation would be required to modify the way it has accounted for pensions and severance pay obligations had the financial statements been prepared solely under Canadian GAAP.

Net assets internally restricted

Net assets internally restricted represent commitments for future expenditures on projects and capital expenditures. At the time the commitments are settled, expenditures are recorded in the balance sheet or statement of revenue and expenses as appropriate and the restrictions are reversed.

Province of Manitoba vacation pay receivable

The Foundation records a liability with respect to vacation pay entitlements accrued and unused as at year end. This amount is based on current remuneration.

The Foundation was instructed by the Province to record a receivable from the Province and accrue vacation pay liability as at March 31, 1995 for the amount of $667,567. Any subsequent variances in the vacation pay liability are recorded in the statement of revenue and expenses as the receivable from the Province will remain fixed.

Province of Manitoba severance pay receivable

The Foundation is obligated to pay its employees severance pay upon their retirement. The accrued severance pay liability is determined based on actuarial probability factors established by the Province.

The Foundation was instructed by the Province to record a receivable from the Province and accrue severance pay liability as at April 1, 1998 for the amount of $1,153,316. Any subsequent variances in the severance pay liability are recorded in the statement of revenue and expenses as the receivable from the Province will remain fixed.

Province of Manitoba long-term pension funding commitments

Since April 1, 2000, the Foundation records an obligation with respect to the pension plan which certain employees of the Foundation participate in. This obligation is determined by an actuarial valuation every three years with the liability for the intervening years determined using formulas provided by the actuary.

Since April 1, 2000, the Foundation has been instructed by the Province to record a receivable from the Province equal to the amount of the liability for employee pension benefits. The increase in the pension receivable is recorded as Government of the Province of Manitoba long-term pension revenue.

Pension costs

In accordance with the provisions of the Manitoba Civil Service Superannuation Act, the Foundation contributes approximately 50% of the pension disbursements made to retired employees of the Foundation. Pension costs for the year include the amount of this contribution as well as the increase in the unfunded pension liability during the fiscal year.

The pension liability is determined by an actuarial valuation every three years with the liability for the intervening years determined using formulas provided by the actuary. The most recent valuation is as at December 31, 2001 as the actuarial valuation for the period ended December 31, 2004 is still being finalized.

For all new employees hired on or after October 1, 2002, the Foundation is required to pay to the Province a contribution as follows:

- 5.1% on pensionable earnings up to yearly maximum pensionable earnings (YMPE); plus
- 7% on pensionable earnings in excess of YMPE.

The Foundation recognizes a reduction in the Government of the Province of Manitoba long-term pension revenue for this equivalent contribution as incurred.

Capital assets

Purchased capital assets are recorded at cost and contributed capital assets are recorded at their fair value at the date of contribution. Amortization is provided at the following annual rates:

Buildings	5% declining
Computer equipment	30% declining
Furniture and equipment	20% declining
Leasehold improvements	5% declining

Revenue recognition

The Foundation follows the deferral method of accounting for contributions. Restricted contributions are recognized as deferred contributions on the balance sheet until the year in which the related expenses are incurred, at which time they are recognized as revenue. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. With respect to recovery of wages, medical and treatment services, revenue is recognized upon completion of the related treatment.

3 Capital assets

	2005		2004	
	Cost $	Accumulated amortization $	Cost $	Accumulated amortization $
Land	535,065	-	535,065	-
Buildings	3,912,940	2,430,015	3,875,430	2,355,021
Computer equipment	702,293	425,952	505,206	349,753
Furniture and equipment	160,497	113,799	160,497	101,763
Leasehold improvements	621,425	156,070	621,425	131,577
	5,932,220	3,125,836	5,697,623	2,938,114
Net book value		2,806,384		2,759,509

4 Deferred contributions

	2005 $	2004 $
Balance - beginning of year	46,700	101,500
Add: Amount received in the current year related to the following year	60,000	46,700
Less: Amount recognized as revenue in the current year	(21,100)	(101,500)
Balance - end of year	85,600	46,700

5 Net assets internally restricted

	2005 $	2004 $
Balance - beginning of year	1,179,800	776,800
Operations		
Internal restrictions settled in the current year	(319,400)	(136,500)
Internal restrictions imposed for future years	77,200	539,500
	(242,200)	403,000
Balance - end of year	937,600	1,179,800

Internal restrictions have been imposed for the following:

	2005 $	2004 $
Adult Gambling Survey	121,800	80,000
IT Expansion Project	63,600	273,800
Ontario Health Referrals potential cancellation	325,000	325,000
Pathways to a Healthier Workplace Conference	16,500	15,400
Provincial Technology Program	150,000	150,000
School-based Alcohol and Drug Survey	-	50,000
Youth Services	235,700	206,400
Accreditation Project	-	40,000
Human Resources Leave Management Project	25,000	20,000
Student Assistance Program Conference	-	19,200
	937,600	1,179,800

6 Commitments

Leases

The Foundation leases buildings and equipment under long-term operating leases which expire at various dates between 2005 and 2011. Certain leases contain renewal options at rates to be negotiated. Future minimum lease payments required under operating leases that have initial lease terms in excess of one year are as follows:

	$
2005	148,482
2006	122,061
2007	104,480
2008	86,676
2009 - 2011	16,963
	478,662

7 Contingencies

As at March 31, 2005, there is one legal claim against the Foundation. The potential liability, if any, to the Foundation is currently not determinable.